



PUBLIC HEALTH

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HEALTHIER WASHINGTON**

Dental Health Professional Shortage Area Designation
An Overview
Office of Community and Rural Health
January 2006

What are Health Professional Shortage Areas?

- Originally established by the Federal Bureau of Primary Health Care in the 1970's to prioritize location of National Health Service Corp (NHSC) providers.
- Over time other dental training and recruitment programs have adopted these designations as a means to establish initial eligibility.
- HPSAs can be established for Medical, Dental and Mental Health
- Expire if not updated by October of the fourth year from designation date
- Geographic designations – total primary care capacity relative to the entire population
- Population designations – is sufficient capacity available to serve a specific population, for example the Low-Income or Migrant Worker population

Designation is an Administrative Process

- Designation governed by complex **federal** rules which dictate
 - What population data to use (Total, Low Income or Migrant)
 - How HPSA boundaries are drawn?
 - Census tract or county geography
 - How to count providers and capacity?
 - What constitutes a shortage?
 - Ratio of a population to dental provider capacity exceeds a certain threshold
 - Availability of alternate sources of care
- Designation rules subject to change:
 - New designation methodology in the works since 1998 – may not come out
 - Interpretation and flexibility of applying existing rules – this has gotten tighter in the last 4 years
- OCRH does not recommend using designations as a systematic measure of access to oral health care or as a means of targeting resources

Dental Health Professional Shortage Area (HPSA) Benefits

- Most important program is:
 - National Health Service Corps
 - **STATE LOAN REPAYMENT DOES NOT REQUIRE A HPSA**
 - Federal Dental Residency Training Grants
 - University of Washington
 - Federal Primary Care / Dentistry Integration
 - Yakima Valley Farmworkers Clinic Pilot
- Can enhance eligibility for certain grants
 - “Medically Underserved Areas”

National Health Service Corps

- Dental Student Loan Repayment or Scholarships in exchange for two year service commitment
- Dentists and Dental Hygienists
- Several additional requirements
 - Must serve the designated population (e.g. Low Income or Migrant Workers)
 - Posted Sliding Fee Scale discount schedule available at entire facility
- Competitive application process scored on degree of need
- Contact the Washington State Primary Care Office for more information on NHSC site requirements and competitiveness.
 - Mary Looker (360) 236 2808
 - Juno Whittaker (360) 236 2812

National Health Service Corp: HPSA Issues

- Type of HPSA influences
 - Which population the provider and site must serve
 - Need score (higher scores more competitive)
 - Score based on population to provider ratio Health, poverty characteristics of the population
 - Distance to nearest care for the population
 - Maximum number of NHSC placed in an area (larger population in shortage means more providers could be placed)
- Automatic Facility Designation for NHSC
 - Available for Community Health Centers and other practices willing to take all patients regardless of willingness pay
 - Not scored and therefore lower priority for placement
- In 2005 all sites applying for NHSC Loan Repayment were funded (this could change in the future)
- HPSA score is used for placing NHSC scholars – few areas of the state are currently eligible – but check with the Primary Care Office

Roles and Responsibilities In Federal Designation System

- Local Partners
 - May initiate request for designation assistance
 - Assistance with data collection
 - Provide guidance on designation strategy
- Office of Community and Rural Health/Primary Care Office
 - Review/comment/approve on behalf of Governor
 - Prepares and monitors designation requests
 - Technical assistance on rules, methods, and data
 - Information on changes in designation status
- Shortage Designation Branch/BHP/HRSA/USDHHS
 - Sets rules and procedures
 - Reviews/approves designation requests
 - Notify states of decision

Making decisions on designation strategy

- More than one designation option often possible - population versus geographic
- US DHHS only allows an area to have one designation at a time
- Designation option affects program eligibility
 - Competitiveness for National Health Service Corp Scholars
 - What type facility (FQHC or general practice) will meet site requirements?
- In MOST cases there is only one way to designate
- Our preference is for local direction
- If more than one designation option possible decision made in the following order
 - Stakeholder/community consensus
 - Local health jurisdiction recommendation
 - Office of Community and Rural Health reviews/decides as a last resort based on
 - Whether significant impact on financial viability of practices
 - Immediate effects on primary care recruitment (J-1 and NHSC)
 - Access for vulnerable populations

A New Partnership With Local Health Jurisdictions

- Initial contact/Local Health briefing (DOH)
- Stakeholder briefing (Local lead/DOH support)
 - Initial briefing re: designation and data collection
 - Enlisting support – participant outreach
- Data Collection (Local Lead/DOH Support)
- Analysis of designation options (DOH)
- Recommendation/direction on community designation strategy (Local Lead/DOH Back-up)
- Preparation and submission of designation requests (DOH)
- Notification of changes in designation status (DOH)
- Release of data in community to support oral health coalition work (Local Health)

Who do I work with on HPSA?

- OCRH Washington State Shortage Area HPSA Website
<http://www.doh.wa.gov/hsqa/ocrh/HPSA/hpsa1.htm>
- Laura Olexa (360) 236-2811 for inquiries
 - Current designation status
 - General information
 - Responding to provider surveys
- Vince Schueler (360) 236-2806 for inquiries
 - How can I get my area designated?
 - How do I make sure my concerns are addressed in the designation process?
 - Affects of changes in federal rules on eligibility for HPSA related programs
 - Concerns, complaints, and appeals



County Dental Care HPSA Assessment/Survey Schedule (subject to change)

2004/2005

Adams
Benton/ Franklin
Clallam
Ferry
Grant
Island
Jefferson Kitsap
Klickitat
Lincoln
Mason Okanogan
Pacific
Pend Oreille
Skamania
Skagit Stevens
Snohomish Wahkiakum
Whatcom Yakima

2006

Asotin
Columbia
Cowlitz
Garfield
Lewis
Pierce
San Juan
Walla Walla
Whitman

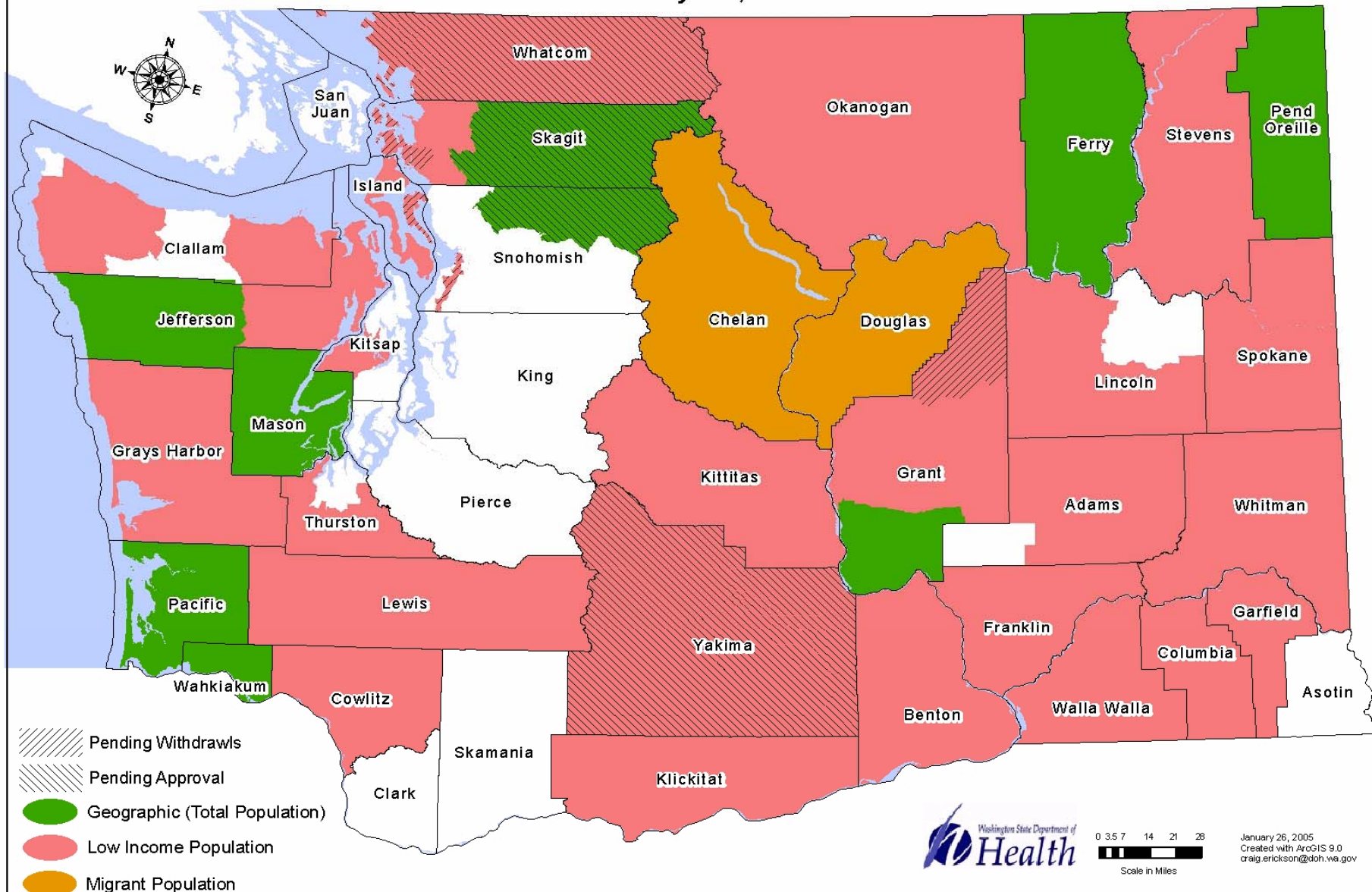
2007

Kittitas
Lewis
Thurston
Spokane
Yakima
Chelan/Douglas

Not surveyed

King (partial 2005)
Clark

Federally Designated Health Professional Shortage Areas for Dental Care January 26, 2005



Designation data from the Office of Community and Rural Health.
Designation status changes frequently. For current information
Contact Laura Olexa (360) 705-6772.



0 3.5 7 14 21 28
Scale in Miles

January 26, 2005
Created with ArcGIS 9.0
craig.erickson@doh.wa.gov

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Appendix

HPSA Primer

Other Services Available from the Office of Community and Rural
Health

HPSA Primer

Three Primary Care HPSA Requirements:

1. A Rational Service Area

- Defined in census units only (federal law)
 - Nationwide system
- Geographic designations
 - Whole counties
 - But not if “too big” (>250,000) in urban areas
 - Multiple counties (Population center w/in 30 minutes travel time)
 - Sub-county areas or parts of multiple counties (Population center w/in 30 minutes travel time)
- Population designations
 - Whole or multiple counties
 - Sub-county areas must have similar racial and economic characteristics
 - Low-Income threshold > 30% below 200 % FPL

Three Primary Care HPSA Requirements

2. Ratio of Population to Dental Capacity in Rational Service Area Exceeds Federal Criteria

- Geographic (Total Population) Designation Threshold
 - Resident Civilian Population: Primary Care Dental Full-time Equivalencies > 5000:1
 - Threshold reduced to 4000:1 – if “high needs” area (low income population or other measures)
- Population (Low-Income or Migrant Worker) Designation
 - Specific Population: Dental Capacity Serving the Population > 4000:1
- Requires comprehensive data on oral health capacity
 - Primary dental care includes Family Dentistry, General Dentistry and General Pediatric Dentistry.
 - Dental Hygienist and Assistant capacity must also be counted Providers excluded (NHSC, J-1, InHS, Urgent Care, Administrative)
 - Full-time Equivalent (FTE) Providers
 - Used to make apples to apples comparisons and adjust for hours of direct care
 - 1 FTE = 40 hours of direct patient care
 - Dental capacity adjusted for dentist age and support staff using federal criteria

Population Data Sources Determined by Federal Guidelines

- Resident Civilian Population and 200% Poverty Population (2000 Census)
- Homeless population if greater than Census 2000 counts (DCTED or local counts)
- Tourist population (local data adjusted for bed nights)
- Migrant Population (HRSA 2000 Migrant Enumeration adjusted for length of agricultural season)
- Total Population = County Population + additional homeless population + tourists (if applicable)
- Low Income Population = 200% FPL Population + Homeless

Three HPSA Requirements

3. Care not available in adjacent areas

- Geographic (Total Population)
 - Nearest care more than 40 minute travel time away (25-30 miles)
 - Or total population to dental capacity ratio > 3000:1 in adjacent area
 - Or access barriers can be documented (geography, highways)
- Population Designation
 - Nearest care more than 40 minute travel time away (25-30 miles)
 - Low-Income or migrant population to capacity ratio > 3000:1
 - If over 20% > 100% FPL then can use transit travel times
 - Significantly different poverty/race/ethnicity
- Must consider capacity in adjacent areas available if ratio <3000:1 regardless of whether dentists are accepting new patients

Office of Community and Rural Health: Other Services

- Recruitment and Retention Services
 - Washington Recruitment Group
 - State Loan Repayment Program
 - J-1 Visa Waiver
 - Area Health Education Center (AHEC)
 - Locum Tenens
 - Retired Provider Malpractice Insurance Program
 - Student programs (R/UOP,R/UOE,U-DOC, Ambassador Program)
- Primary Care Office
 - Community and Migrant Health Center development
 - National Health Service Corps site development

Other Services (Cont.)

- Rural Health Systems Development Grants
- Critical Access Hospital Program
- State-wide Office of Rural Health
 - Policy work and coordination
- Rural Health Clinic Program
 - Pre-qualification
 - Technical assistance (in process)

Health Care Access Research

- <http://www.doh.wa.gov/hsqa/ocrh/har/hcresrch.htm>
- Detailed county access reports on access to primary care
- Washington Rural Health Assessment Project
 - 7 short studies on primary care access – Elder Care – Children, Maternal Health etc Washington Primary Care Safety Net Assessment
 - Overview of the system
 - Where to target resources
 - Past and future growth trends
- Healthcare Infrastructure Mapping Project
 - Mapping key features of the health care system in relation to population and travel
 - Maps include:
 - Hospitals, Rural Health Clinics, Community Health Centers, Rural Primary Care Clinics, Eldercare Options, and OB Access



Contact Information

Vince Schueler

Office of Community and Rural Health

PO Box 47834

Olympia, WA 98504-7834

(360) 236-2806 (Voice)

(360) 664-9273 (Fax)

vince.schueler@doh.wa.gov

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